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Subject: Navy & Marine Corps Medical News (MEDNEWS #01-13)

Navy & Marine Corps Medical News (MEDNEWS) is a weekly compendium of news and information contributed by commands throughout the Navy medical department.

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MEDNEWS is distributed to Sailors and Marines, their families, civilian employees, and retired Navy and Marine Corps families. Further distribution is encouraged.

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MN011301. The Military and Hep C: Good News

Silver Spring, MD -- A study directed by the Naval Medical Research Center in Silver Spring, MD, has good news about military members' hepatitis C risk.

Hepatitis C is a contagious viral disease that leads to permanent liver damage, and, in many cases, death.

According to the study, published in the American Journal of Epidemiology, military people are at three to five times lower risk of contracting the hepatitis C virus as civilians.

The study evaluated blood samples of 21,000 military personnel serving in 1997. It found that only .5 percent were infected with the hepatitis C virus, and men and women were infected at the same rate. Among adults in the general population, 3.7 percent of males and 1.6 percent of females were infected.

In addition to active duty members, the study evaluated Reservists, personnel about to retire, healthcare personnel, and members who had been serving since

before 1974. Importantly, Reservists were found to have the same level of infection as active duty personnel, and healthcare personnel and Vietnam era members were not at increased risk of infection.

"The very low level of hepatitis C virus in today's military can be attributed to infrequent injection drug use, which is the most common source of hepatitis C virus transmission in the United States," said Dr. John Mazzuchi, deputy assistant secretary of Defense for Health Affairs.

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MN011302. Operation Uplink Brings Hospital Sailors Closer to Home

Pensacola, FL -- A gift from former military members who remember how lonely being away from home can be is bringing Naval Hospital Pensacola patients and staff closer to their friends and families.

Army Col. John Crane, Ret., of Veterans of Foreign Wars' District One visited the hospital to present 300 pre-paid calling cards to patients and Sailors as part of the VFW's Operation Uplink. The program helps active duty service members and hospitalized veterans ease the loneliness of separation by providing a way to phone home without the burden of a big long distance bill.

"This is a magnificent gift from the VFW and will undoubtedly be well received by our Sailors and patients," said RADM (Sel) Robert D. Hufstader, NH Pensacola's commanding officer.

Crane toured the hospital and personally distributed 25 phone cards to corpsmen working in the new outpatient clinic. He said that more than 200,000 cards have already been distributed to U.S. troops in Bosnia, Germany, Kuwait, Saudi Arabia, Korea and Alaska, as well as in a number of military hospitals and installations throughout the states.

"I'm going to call my dad," said HN Michael James, one of the Sailors who received a calling card. "He is in the hospital back home."

By JO1 Maria Christina Mercado, Naval Hospital Pensacola

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MN011303. Wait Less at Great Lakes Emergency Room

Great Lakes, IL -- It's 8 p.m. Your ankle is swollen up like a melon. Your two year old is spiking a fever of 102. Your adolescent is complaining of a bad stomachache.

All of these are cause for concern, but you hesitate taking a trip to the emergency room because of the long wait to see a doctor. But if you go to Naval Hospital Great Lakes, you may be wait-less if you visit the emergency room between 4 and 10 p.m., Sunday through Friday.

The NH Great Lakes Emergency Room now has a second

physician available to see patients with minor illnesses and symptoms.

According to Emergency Room Head LCDR Louis Bienvenu, MC, that means faster service for patients with non-urgent illnesses or injuries.

The program is called Fast Track and beneficiaries are encouraged to come to the Emergency Room and if they truly do not feel well.

"It takes the guesswork out of whether a patient is unsure about coming to the Emergency Room," CAPT Elaine C. Holmes, MC, NH Great Lakes' commanding officer said. Since the program's start last month, the wait time to be seen has decreased dramatically.

By LT Youssef Aboul-Enein, MSC, Naval Hospital Great Lakes

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MN011304. Quitting Tobacco With a "Teachable Moment"

Great Lakes, IL -- There's no hiding tobacco use from your dentist.

Tobacco-use problems can range from tooth staining and bad breath to slow oral healing to periodontal disease to disfiguring and dangerous oral cancer. But now, thanks to Great Lakes Naval Dental Center's unique tobacco cessation program, hundreds of Great Lakes Naval Training Center staff and students are quitting.

CAPT Larry Williams, DC, started the program, in 1999. Since then, it's estimated that the center helps almost 100 Sailors a month quit using tobacco.

Williams organized the center's dentists to take advantage of "teachable moments" - the time they have patient's undivided attention in the dental chair - to explain and sometimes graphically illustrate the link between tobacco and dental disease.

"Not all patients, especially our students and their instructors, have the time to sit through classes," Williams said. "Our program consists of five 10 to 15 minute appointments, selected by the patients, spread over an eight-week period."

"Dentistry offers an ideal setting for tobacco cessation because all patients who use tobacco have some form of tobacco-related problem in their mouth," Williams said. "Another ideal reason for the dental team to be involved is that tobacco use has a strong hand-to-mouth, oral component, and we dentists are used to helping patients modify those habits."

Patients are helped with individual problems as they arise. The success rate is very good, especially since patients have buy-in into the program because they know that when they quit, their oral health will visibly improve.

In addition to behavior modification, the program recommends nicotine gum and Zyban. Dentists also

recommend that once tobacco users quit, they continue using sugar-free gum, which can help decrease oral plaque.

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MN011305. Thrift Savings Plan Opens to Military Oct. 9

Washington, DC -- Service members can begin to sign up for the Thrift Savings Plan beginning Oct. 9, 2001, DoD officials said.

The Thrift Savings Plan is a retirement and investment plan that has been available to civilian government workers since 1987. Congress extended the plan to include service members in 2000.

"It's in addition to your regular retirement," said Army Lt. Col. Tom Emswiler, a tax expert with DoD's Office of Military Compensation. "It's an optional program."

The open season for signing is Oct. 9 to Dec. 8. Deductions start in January 2002. In 2002, service members can contribute up to 7 percent of their basic pay. The maximum amount service members can contribute from basic pay will change from 7 percent of basic pay, the current limits, to 10 percent by 2005 and then will become unlimited in 2006.

Unlike civilians, who cannot make lump-sum payments into the program, service members may also contribute all or a percentage of any special pay, incentive pay, or bonus pay they receive.

"You can contribute from 1 percent to 100 percent of your special pays, incentives and bonuses into the thrift plan," Emswiler said.

The total amount generally cannot exceed \$10,500 for the year.

Contributions from pay earned in a combat zone do not count against the \$10,500 ceiling. Combat zone contributions are subject to a different limitation, however, 25 percent of pay or \$35,000, whichever is less.

Like civilian employees in the program, service members must choose how they want their money invested. Right now, there are three funds to choose from. The funds run the gamut of safe - the G Fund invests in special government bonds - to riskier investments - the C Fund tied to the stock market. There is also an F Fund for investing in commercial bonds.

TSP will unveil the new S and I funds in May. S Fund investments go to a stock index fund that paces small businesses. I Fund investors will track international companies the same way.

Service members will be able to start, change or reallocate their TSP contributions during two open seasons held each year. These are November to January and May to July.

"Because bonuses are hard to predict, if you are already participating in the plan and contributing from basic pay and you receive, for example, a re-enlistment

bonus, you can elect to contribute at any time," Emswiler said.

Contributions to the plan come from "pre-tax" dollars. Service members pay no federal or state income taxes on contributions or earnings until they're withdrawn.

For more information, see the TSP Uniformed Services Plan website at www.tsp.gov/uniserv/index.html.

By Jim Garamone, American Forces Press Service

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MN011306. Portsmouth Volunteers Build Homes for Humanity

Portsmouth, VA -- Sailors from Naval Medical Center Portsmouth recently braved heavy rains to wield hammers, saws and drills to build a Habitat for Humanity house that will be a home for a low-income family.

"I've always done volunteer work because I think it's important to help others," said ENS John Zalar, NC, a nurse with the NMC Portsmouth's Ambulatory Procedures Department. "And I try to get other people involved as well. I decided to give it a try here at the hospital and see if anyone would get involved."

Almost a dozen Sailors showed up to spend the day working on the home.

Habitat for Humanity is a worldwide program that builds homes for people with low income. People receiving assistance from the program buy the materials for the home, but Habitat for Humanity volunteers provide the labor.

By JO2 Duke Richardson, NMC Portsmouth

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MN011307. 55 Years Later, WW II Vet Gets His Due

Pensacola, FL -- Red Cross volunteer John Seigler, 79, is known as the "chairman of the wheelchairs" at Naval Hospital Pensacola. For the last 10 years, he's volunteered 1,200 hours each year helping patients and staff.

Recently, the retired Air Force Master Sergeant received a surprise in his mailbox - six World War II medals and badges and an Honorable Service pin. The medals included a Bronze Star awarded for his service during the often deadly Burma Road campaign.

Last week, NH Pensacola's Commanding Officer RADM (Sel) Robert D. Hufstader personally award the Bronze Star, one of the military's highest medals, to Zeigler. The presentation was part of a recognition ceremony that commemorated the 65th anniversary of Red Cross volunteers at the hospital.

Zeigler was also awarded the Combat Infantry Badge.

"Had I known about getting the badge back then, it would have been worth about \$3 a payday," Zeigler said.

"That's not bad when you're making \$72 a month as a

sergeant."

By Rod Duren, NH Pensacola

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MN011308. TRICARE Question & Answer

Question: I am enrolled in the Uniformed Services Family Health Plan (USFHP). What effect will TRICARE For Life have on me?

Answer: The new benefits under TRICARE should have no effect on enrollees in USFHP. Those enrolled, including retired beneficiaries age 65 and older, already receive the full TRICARE benefit. THE USFHP contractor provides healthcare services, including a full pharmacy benefit, through a network of hospitals and providers functioning as a managed healthcare plan. The seven USFHP plans operate under a special "designated status" as though they are military treatment facilities. The Department of Defense (DoD) fully funds this program through appropriations from Congress. Currently, Medicare-eligible enrollees in the USFHP are not required to be enrolled in Medicare Part B. Since Medicare has no obligation to pay for any of the costs of healthcare services, it is not anticipated that DoD will modify this policy.

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MN011309. HealthWatch: Food-Borne Illness Is No Picnic

Take a warm sunny day, sit down at a table under the trees, serve portable foods such as salads and casseroles, and it may add up to more than a picnic.

More than two million Americans will get a food-borne illness this year, and, according to the Centers for Disease Control, about 85 percent of it is due to improper food handling.

Charles Robinson, an environmental health specialist at the Naval Environmental Health Center in Norfolk, VA, said that often people attribute food-borne illnesses as "a 24-hour bug."

"Many never know they've had a food-borne illness," he said.

According to Robinson, bacteria are always present everywhere and some always get to the food we eat. Fortunately, these bacteria usually present no problem; however, allowed to incubate at temperatures between 41 and 145 degrees, bacteria thrive, especially in many favorite picnic foods.

The toxins bacteria produce can cause nausea, vomiting, diarrhea, and stomach pain. Symptoms usually appear three to 36 hours after eating, the severity varying with the amount eaten and an individual's susceptibility.

Fortunately, following a few easy rules can prevent almost all food-borne illness.

- Don't eat meats, creamy salads, dressings, sauces,

or other "wet" foods that have been sitting out between 41 and 145 degrees for more than a total of four hours.

- Be especially careful when cooking foods that require a long time to cool, such as ham or turkey. Some parts of the meat may stay over 41 degrees long enough to become a bacteria incubator.

- Keep your refrigerator between 32 and 41 degrees. Use a thermometer to check it.

- Defrost meats in the refrigerator or with a microwave. Do not leave out at room temperature on the kitchen counter.

- Reheat cooked meats quickly to higher than 165 degrees for at least 10 minutes to destroy bacteria before serving. If they've been left out for more than two hours, even this reheating may not destroy all the toxins.

- Picnic or party foods should be put on ice to keep them cool.

- Wash hands, cutting boards and counter tops frequently. Acrylic cutting boards are easier to keep clean.

- When attending a picnic where you have doubts about the preparation of the food, stick with "dry" items such as breads, crackers, hard cheeses, and relishes. Avoid rare or uncooked meats, salad, and deli items.

If food-borne illness does strike, symptoms usually run their course in 12 to 72 hours. Meanwhile, here are some hints to make you feel better:

- If you are vomiting, keep hydrated with ice chips or small sips of water.

- Drink only clear non-carbonated liquids for 24 hours.

- Stick to easily digestible foods, such as dry toast and applesauce for the first day.

- Don't eat spicy or fatty foods for 48 hours after all symptoms have gone.

If symptoms don't improve in 12 hours, or if breathing is rapid and temperature is over 102 degrees, seek medical help. If you can, take a sample of the suspect food with you.

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Stories in MEDNEWS use these abbreviations after a Navy medical professional's name to show affiliation: MC-Medical Corps (physician); DC-Dental Corps; NC-Nurse Corps; MSC-Medical Service Corps (clinicians, researchers and administrative managers). Hospital Corpsmen (HM) and Dental Technician (DT) designators are placed in front of their names. Photos for corresponding cutlines are available for download at navymedicine.med.navy.mil 1-3 days following the posting of this email.

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